Declaration

OR

Submitted after Initial

PTO/SB/01 (10-01) Approx of use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DLP080 Att rn y D cket Number Sagan First Nam d Invent r **COMPLETE IF KNOWN Application Number** Filing Date **Art Unit**

Gubillitted	Filing (surcharge	ALL OTHE						
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name						
As the below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Optical Multiplexer/demu								
(Title of the Invention)								
th specification of which is attached hereto								
OR								
was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).				
hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								



PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Pat nt Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below								
Digilens, c/o John Gunther								
Name 615 Palomar Avenue								
Address			CA	94086				
Sunnyvale City			5 A	ZIP				
USA 408-73				408-737-1190				
	elephone			Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name Stephen F. (first and middle [if any])			Sagan Family Name or Surname					
Inventor's Signature	Date 19 FEB 2002							
Lexington	MA		USA	USA				
Residence: City \ State Country Citizenship Citizens								
Mailing Address Lexington	MA		02420	USA				
City	State		ZIP	Country				
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature			Date					
Residence: City	State		Country	Citizenship				
Mailing Address								
Y CONTRACTOR OF THE PROPERTY O								
City	State		ZIP	Country				
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached h reto.								